U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Fallure to comply may result in criminal prosecution, fines or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only	For Official Use Only		
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.			
E Bay E			
1. File Number U - 170 6 6	2. Fiscal Year Covered From:		
	1 / 1 / 2004 Through: 12 / 31 / 2004		
Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Chris D Campbell	Name Teamsters Local Union No 305		
	Labor Organization File Number 005-158		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 28502 Chapman Road	Street 1870 NE 162nd Avenue		
City Scappoose	City Portland		
State Oregon Z:P Coxle + 4 97056-200	5 State Oregon ZIP Code + 4 97230-564		
5. Position in labor organization. Business Representative			
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of			
monetary value from an employer whose employees your organizate	don represents or is activaly seeking to represent.		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
r.o. box, blog., room no., ii airy	7.b. Amount.		
Street			
City			
State ZIP Code + 4			
Signature			
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the Instructions.)			
Signed	On 8/15/2005 503-251-2305 Date Telephone Number		
	Date (oophone realise)		

Name of Person Filing Chris D. Campbell	File Number U-			
B. Held an Interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, se'ling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or ceiting or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any). Name Oregon Teamster Employers Trust Trade Name, if any: C/O William C Earhart CO P.O. Box, Bldg., Room No., if any P O Box 4148	9. Business deals with: X a. Labor Organization b. Trust c. Employer			
Street 3140 NE Broadway City Portland State Oregon ZIP Code +4 97208-18]				
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing.			
Street City State ZIP Code + 4	11.b. Approximate dollar value of such dealing. 12.a. Nature of interest hald or income received. Registration fee for International Foundation 2005.			
	12.b. Amount. 1,900.00			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (Including trade name, if any).	14.a. Nature of payment.			
Name Trade Name, if any:				
P.O. Box, Bldg., Room No., if any Street City State ZIP Ccda + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			

Name of Person Filing Chris D. Campbell		File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any). Name Northwest Administrators Trade Name, if any: P.O. Box, Bidg., Room No., if any Street 500 NE Multnomah, Suite 720 City Portland State Oregon ZIP Code +4 97232-203	9. Business deals with: X a. Labor Organiza b. Trust c. Employer	ation		
	44 . Notes &			
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	11.a. Nature of such deal			
City	12.a. Nature of interest he			
State ZiP Code + 4	Food/Beverag	re		
	12.b. Amount.	30.00		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (Including trade name, if any).	14.a. Nature of payment.			
Name				
Trade Name, if any:		-		
P.O. Box, Bldg., Room No., if any				
Street				
City				
State ZiP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			



Dairy, Bakery & Food Processors, Industrial, Technical & Automotive, Local Union No. 305

Affiliated with The International Brotherhood of Teamsters
1870 N.F. 162nd AVENUE • PHONE (503) 251-2305 • FAX (503) 251-2301
PORTLAND, OREGON 97230-56+2

August 15, 2005

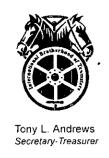
The transactions, dealings and interests that are reported in the attached LM-30 represent my good faith effort to reconstruct any reportable occurrences for calender year 2004. Some items may have been unintentionally omitted. If, in the future, it comes to my attention that there is a matter which should have been reported for calendar year 2004, I will file an amended Form LM-30.

Signed,

Chris Campbell

Business Representative

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PORTLAND, OREGON 97230-5642

August 15, 2005

Office of Labor-Management US Department of Labor 200 Constitution Avenue NW, Room N5616 Washington DC 20210

RE: 2004 LM-30 Report

Dear Sir:

Enclosed you will find my LM-30 report for year ending 2004.

Very truly yours,

Chris Campbell Business Representative

TLA/sm Enclosure

Certified Letter #: 7004 1160 0006 1631 1449